Cholera, Dysentry, Gastroenteritis, Viral Fever etc. every year and about the death toll due to these diseases; and

(b) if so, what remedial measures have been taken by Government?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE [DR. (SHRIMATI) RITA VERMA]: (a) As per surveys conducted, the major diseases prevalent in the tea garden population in Assam are diarrheal diseases, malaria and other vector-borne diseases. Specific figures regarding death toll due to above diseases in tea gardens alone are not available.

(b) The following remedial steps have been taken to control the diseases:

(1) The National Anti-malaria Programme is being implemented all over the country, including Assam to control Malaria and other vector-borne diseases. Apart from primary health care services delivered by State/UT Government(s), the tea garden authorities also have the health infrastructure for rendering health care delivery to the tea garden population. These health care services are also supplemented by the State Helath authorities by deputing medical teams at the time of outbreaks and also by providing requisite services as per need.

(2) Epidemiological investigation of diarrheal diseases in tea gardens and adjoining areas of Assam have been carried out and the State Government and tea garden authorities are assisted in training of doctors and para-medical staff for management of diarrheal diseases. Besides, community directed health education camps are held in tea gardens for spreading awareness on communicable diseases.

National Family Welfare Programme

3496. SHRI ANANTA SETHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a proposal to integrate the Indian Systems of Ayurveda and Unani medicines into the National Family Welfare Programme is under the consideration of Government;

(b) whether the Ninth India Population Project with World Bank assistance is also pending with Government;

(c) if so, the details of the above two proposals;

(d) whether Government would clear these proposals; and

(e) if so,the details of course of action followed to implement the above two proposals?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE [DR. (SHRIMATI) RITA VERMA]: (a) to (e) As part of the National Family Welfare Programme, Government of India is implementing the Reproductive and Child Health Programme. This programme aims at improving the health of women and children and reducing the maternal, infant and child mortality and morbidity. Government of India has decided to involve the Indian Systems of Medicine and Homoeopathy particularly, the Ayurveda and Unani systems to ensure that the benefits of the Reproductive and Child Health Programme reach the widest possible cross section of the population including those wishing to avail themselves of the Indian Systems of Medicine, for this purpose the Reproductive and Child Health Programme also has the following provisions (including the scheme mentioned above) for mainstreaming the Indian Systems of Medicine:

(i) Training of ISM practitioners on concepts and practices of ISM relating to Reproductive and Child Health.

(ii) Improving awareness and availability of ISM remedies.

(iii) Research in ISM.

(iv) Improving access to availability of medicinal plants by establishing Vanaspati Vans.

(v) Supply of Ayurvedic medicines to 7 States i.e., Himachal Pradesh, Madhya Pradesh, Rajasthan, Uttar Pradesh, Karnataka, Tamil Nadu and Kerala and also Unani medicines in 4 cities viz. Delhi, Lucknow, Aligarh and Hyderabad in the first phase. These medicines are in addition to the drugs already being supplied as part of Drug Kits to the sub-centers under the Reproductive and Child Health Programme. A provision of Rs. 70 crores has been kept for this purpose during the Ninth Plan Period.

The World Bank assisted IX India Population Project is already being implemented in the entire State of Assam, in 10 districts of Rajasthan, 13 districts of Karnataka with effect from 16th June, 1994. The main objectives of the project are to provide area specific health and family welfare services

and to improve the service delivery system, for the rural population in the States of Assam, Karnataka and Rajasthan to achieve reduction in birth rate and maternal and infant mortality levels. The project provides for the construction, furnishing and equipping of rural health facilities like Sub- centres, Primary Health Centres, District and State Level Training Centres, Warehouses and upgradation of facilities of facilities. The project also provides for training health and family welfare services providers, IEC and innovative schemes. A proposal to enhance the cost of the project from Rs. 335.00 crores to Rs. 414.06 crores to facilitate completion of the project activities and to meet the escalated cost has been approved recently. The States are implementing the projects as per the revised approved costs.

Undue increments and pay protection to JNU employees

3497. SHRI RAJU PARMAR: Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state:

(a) whether the Ministry of HRD has allowed the JNU to grant undue increments to its employees from the year 1986 and protection of pay upto the maximum of grade and personal pay beyond that;

(b) if so, under which Government rule/policy; and

(c) if not, what action Government propose to recover the undue payment made to JNU employees?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (DR. MURLI MANOHAR JOSHI): (a) to (c) No undue benefit has been provided to the teaching employees of the University. However, with regard to the non-teaching staff, the University had approved second upward Movement Scheme and Personal Pay Scale Scheme on 12.7.1996 and 2.7.1997 respectively with the approval of their Executive Council and implemented with effect from 1.1.1996. However, the Government of India has allowed the revision of pay scales as per the recommendations of the 5th Pay Commission and as per the terms and conditions laid down by UGC only.

Merger of Mahila Samriddhi Yojana and Indira Mahila Yojana

3498. SHRI NANA DESHMUKH: Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state:

(a) whether it is a fact that two schemes viz. Mahila Samriddhi Yojana